

**INFORMATION AND COMMUNICATION SERVICES
NIH - TASK ORDER**

RFTOP# 137

**TITLE: Planning, Developing, Implementing, and Evaluating
NHLBI's Healthy Weight Initiative**

PART I – REQUEST FOR TASK ORDER PROPOSALS

A. POINT OF CONTACT NAME: Joanna Magginas
Phone: 301-435-0360
Fax: 301-480-3432

Proposal Address:	Billing Address:
Joanna Magginas, Contracting Officer	Joanna Magginas, Contracting Officer
National Heart, Lung, and Blood Institute	National Heart, Lung, and Blood Institute
Division of Extramural Affairs, COB	Division of Extramural Affairs, COB
6701 Rockledge Dr, MSC 7902 (Rm 6138)	6701 Rockledge Dr, MSC 7902 (Rm 6138)
Bethesda, MD 20892-7902	Bethesda, MD 20892-7902
If using courier service: Zip Code 20817	

B. PROPOSED PERIOD OF PERFORMANCE: Three years from date of award

C. TASK DESCRIPTION: See Below.

D. TECHNICAL EVALUATION FACTORS: See Below.

E. RESPONSE DUE DATE: July 7, 2003, 4:00 PM local NIH time.

F. PRICING METHOD: Cost Reimbursement

G. PROPOSAL INSTRUCTIONS: See Below.

NOTE: All questions must be submitted to Joanna Magginas at magginaj@nhlbi.nih.gov by June 13, 2003 (close of business).

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IV. Statement of Work

NOTE TO OFFERORS: This RFTOP procurement will result in the award of a performance-based task order. As such, offerors shall propose measurable performance standards to enable

assessment of contractor work performance. A Quality Assurance Surveillance Plan (QASP) will be negotiated in which specific key performance requirements and incentives will be identified.

A. Background Information

1. Project Description

The contractor shall provide services to the National Heart, Lung, and Blood Institute's (NHLBI) Office of Prevention, Education, and Control (OPEC) in the planning, development, implementation, and evaluation of a national outreach initiative, which includes communications products and activities and community outreach activities that meet the public education goals of implementing an NHLBI national health education action plan on reducing overweight/obesity and on promoting a healthy weight. The current outreach effort will seek to increase the level of awareness of community organizations, especially those involved in parks and recreation, and the public, particularly those at high risk, about the increased risks associated with overweight and obesity and the health benefits of maintaining a healthy weight. It will also explore the potential role of environmental change in a community setting at helping individuals achieve a healthy weight.

These efforts support the President's HealthierUS Initiative and the DHHS Secretary's Steps to a HealthierUS Initiative. The HealthierUS Initiative is built on the premise that increasing personal fitness and becoming healthier is critical to achieving a better and a longer life. Steps to a HealthierUS advances HealthierUS by providing a major shift in the approach to the health of Americans—from a disease care system to a health care system. These efforts also support two of the HealthierUS Memoranda of Understanding (MOU); one between DHHS and the Department of Agriculture's Forest Service, Department of the Interior, and Department of the Army to promote uses and benefits of the Nation's public lands and water resources to enhance the physical and psychological health and well-being of the American people, and another MOU between DHHS and the Departments of Education and Agriculture to strengthen and promote the education and health of the Nation's school-age children and youth.

Since 1991, the NHLBI Obesity Education Initiative (OEI) has sponsored a variety of activities to encourage all Americans to aim for a healthy weight and to alert physicians and other primary care health providers of the risks associated with overweight and obesity. Outreach activities of the OEI are directed at health professionals, patients and the public, and entire communities to deal with the increasing public health problem of overweight and obesity. Obesity and overweight substantially increase the risk of morbidity from hypertension; dyslipidemia; type 2 diabetes; coronary heart disease; stroke; gallbladder disease; osteoarthritis; sleep apnea and respiratory problems; and endometrial, breast, prostate, and colon cancers. Higher body weights are also associated with increases in all-cause mortality.

In order to implement a "high-risk" strategy, the NHLBI OEI in cooperation with the National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK) convened an expert panel to consider the scientific evidence related to these health risks and to develop clinical guidelines. The first Federal *Clinical Guidelines on the Identification, Evaluation,*

and Treatment of Overweight and Obesity in Adults: Evidence Report was released in June 1998. A number of educational efforts and activities have been underway to promote the key recommendations of the *Clinical Guidelines* to professional organizations, health practitioners, and patients. All of these efforts are described on the NHLBI's Aim for a Healthy Weight Web page.

Implementation of the OEI's "population-based" strategy includes community-based activities to encourage all Americans to maintain a healthy weight and reduce overweight and obesity by encouraging a heart healthy eating plan and increased physical activity. The main thrust of this strategy is the Hearts N' Parks program, a nationwide, community-based program conducted in collaboration with the National Recreation and Park Association (NRPA). Fifty Magnet Center sites have been established to implement Hearts N' Parks activities in high-risk communities. Six additional Marine Corps bases serve together as another Magnet Center site. A *Hearts N' Parks Community Mobilization Guide* has been developed to focus on the 5 Ps of Hearts N' Parks, namely **P**eople, **P**rograms and practices, **P**ublic visibility, **P**artners, and **P**erformance measures. The *Guide* and its accompanying videotape have been distributed to 1,400 interested park and recreation departments, hospitals, clinics, and State and local health departments.

Since the mid-1990s, NHLBI has partnered with NRPA in order to promote a healthy lifestyle to both individuals and to community leaders. NRPA's mission states that parks and recreation:

- Enhances the human potential by providing facilities, services and programs that meet the emotional, social, and physical needs of communities.
- Articulates environmental values through ecologically responsible management and environmental education programs.
- Promotes individual and community wellness that enhances the quality of life for all citizens.
- Utilizes holistic approaches to promote cultural understanding, economic development, family public health and safety, by working in coalitions and partnerships with allied organizations.
- Facilitates and promotes the development of grassroots, self-help initiatives in communities across the country.

NRPA provides the NHLBI with the potential to reach out to many more communities and expand the Hearts N' Parks program. There are 6,000 communities nationwide that have park and recreation agencies. Currently, approximately 21,000 professionals and individual citizens as well as 1,200 community agencies are NRPA members. NRPA members benefit the community activity by their involvement in:

- Assisting youth in high-risk situations
- Eradicating crime and building stronger communities
- Encouraging healthy lifestyles
- Protecting and preserving environmental resources

This outreach effort will seek to involve those involved in parks and recreation especially those communities that currently comprise the Hearts N' Parks Magnet Center sites

along with other community groups. Hospitals, clinics, State and local health departments, USDA Extension Service, etc., will also participate as this effort attempts to bring together under a cohesive umbrella both the population-based education activities and the high-risk efforts of the NHLBI OEI.

As part of the planning process and in order to avoid duplication of efforts, the NHLBI is seeking to work with groups that have already been active in developing weight-related awareness/education efforts and involve them in the initiative as well as obtain their input on the most appropriate role for the NHLBI. These groups include NIDDK, NRPA, Centers for Disease Control and Prevention (CDC), DHHS Office of Disease Prevention and Health Promotion (ODPHP), President's Council on Physical Fitness and Sports, USDA, Partnership to Promote Healthy Eating and Active Living, American Heart Association (AHA), Centers for Obesity Research and Education (CORE), and North American Association for the Study of Obesity (NAASO).

2. Need for the Procurement/Background

The NHLBI is congressionally mandated to plan, conduct, foster, and support an integrated and coordinated program of basic research, clinical and epidemiological studies, and demonstration and education projects into the causes, prevention, diagnosis, and treatment of diseases of the heart, lungs, and blood vessels, and sleep disorders.

Within the NHLBI, OPEC is responsible for initiating educational activities and for translating research findings into programs and products for use by a diverse audience of health care providers, public health practitioners, patients, and the general public.

Cardiovascular disease (CVD) is the leading cause of death and illness in America. Currently, overweight and obesity are at their highest rates ever in the U.S. with 65 percent of adults considered overweight or obese. Obesity continued to increase dramatically during the late 1990s for Americans of all ages, with nearly one-third of all adults now classified as obese, according to new data from the 1999-2000 National Health and Nutrition Examination Survey published in the October 2001 issue of the *Journal of the American Medical Association*. The data show that 31 percent of adults 20 years of age and over—nearly 59 million people—have a Body Mass Index (BMI) of 30 or greater, compared to 23 percent in 1994. Extreme obesity (BMI equal or greater than 40) also increased significantly in the population, from 2.9 percent to 4.7 percent. Meanwhile, the percentage of children who are overweight (defined as BMI-for-age at or above the 95th percentile of the CDC Growth Charts) also continues to increase. Among children and teens, ages 6 to 19 years, 15 percent (almost 9 million) are overweight according to the 1999-2000 data, or triple what the proportion was in 1980.

Obesity is associated with increased disability, decreased health-related quality of life, increased health care utilization, and increased mortality, all of which translate into increased health care costs to the American public. In 1995, the total direct and indirect health care costs attributable to overweight and obesity were estimated to be \$99 billion dollars, equivalent to approximately 7 percent of the gross domestic product spent on health care. Obesity-related health care cost estimates for 2000 reached \$117 billion.

Due to the alarming increase in the prevalence of overweight and obesity in both children

and adults across all age, gender and race groups, consideration should be given to a sustained national outreach effort on various aspects of body weight pertinent to the specific target audiences needing to be reached.

The DHHS' Steps to a HealthierUS as well as other Secretarial initiatives call upon State programs and community efforts to motivate and support responsible health choices that reduce the burden of preventable diseases such as obesity. Strategies recommended to prevent and decrease overweight and obesity include:

- Promote the recognition of overweight and obesity as a major public health problem.
- Assist Americans in balancing healthful eating, based on the *Dietary Guidelines for Americans*, with regular physical activity to achieve and maintain a healthy weight.
- Identify effective and culturally appropriate interventions to prevent and treat overweight and obesity.
- Encourage environmental changes that help prevent overweight and obesity.
- Develop and enhance public private partnerships to help implement the efforts.

This procurement will deal with the development of a national public education outreach initiative on body weight. It will include key messages appropriate to convey important issues on body weight to the respective target audiences, and include outreach efforts to health care providers, patients and the public through community-based activities.

The Hearts N' Parks Magnet Centers can serve a critical role in disseminating the key messages to the 50 communities that they serve, in making the necessary environmental changes needed to impact the rise in prevalence, and in developing additional public private partnerships needed at the local level. Furthermore, this procurement will provide the support needed to fortify the existing Magnet Centers as well as to expand the program to other communities nationwide. NHLBI has received interest from a number of communities, including Cleveland, Los Angeles and others, that wish to participate as Magnet Centers in the Hearts N' Parks effort. With further expansion, Hearts N' Parks provides the DHHS Secretary with ample opportunity to implement the principles of Steps to a HealthierUS.

B. Objectives

The purpose of this procurement is to obtain services to plan, develop, implement, and evaluate a national public education outreach effort on overweight and obesity that will fortify the existing Hearts N' Parks Magnet Center communities, expand the program, and establish additional Hearts N' Parks communities that can be identified as a "Healthy Weight HometownUS." The objectives of the outreach effort include:

- Increase awareness that overweight and obesity increase the risks for heart disease and stroke, as well as other serious health problems;
- Motivate the public to take overweight and obesity seriously as a health issue;
- Engage the public in recognizing both individual and environmental factors that influence their attempts to achieve and maintain a healthy weight, and ultimately reduce their risk of heart disease;
- Motivate health professionals to provide their patients with clear messages about

- weight control and prevention of inappropriate weight gain without the stigma that overweight and obese patients often feel; and
- Engage communities to take an active role in creating healthier hometown environments that promote a healthy weight.

Note to Offerors: The outreach effort should be implemented as a national-level effort and at selected regional/local levels through the existing Hearts N' Parks Magnet Centers or other communities interested in the Hearts N' Parks program, and in partnership with strategically selected organizations. It should be designed to employ state-of-the-art communication techniques and a variety of communication channels and community based implementation strategies.

II. Services to be Performed

NOTE: Current, ongoing NHLBI activities on weight and physical activity outreach and education, in particular the Hearts N' Parks project, will be transferred to the successful offeror upon task order award.

[For solicitation purposes, the contractor shall provide materials and services for one national awareness campaign/outreach effort and related regional/local outreach efforts. Each of the 50 Hearts N' Parks Magnet Centers would implement the campaign and utilize the messages in their programs. Ten to 15 sites could implement a more focused effort that would include assessment of specific performance measures. Tasks 1-5 apply to the national awareness campaign/outreach effort. Tasks 1, 3, 4, and 5 apply to the related regional/local outreach efforts.]

TASK 1: PROJECT MANAGEMENT AND ADMINISTRATION

The contractor shall provide a project manager for the period of performance of this task order who shall serve as the principal point of contact with the Government and who shall be responsible for preparing reports and plans, supervising project staff, issuing assignments, monitoring task order progress, and maintaining budget control.

The contractor shall be required to develop, implement, and maintain a project management and administrative plan that can both forecast and report information regarding staff time and resources allocated and used for each phase of the project. Associated costs, both direct and indirect, shall be reported monthly on a routine basis by activity and by task. This information shall be made readily available when requested by the NHLBI Project Officer. [For solicitation purposes, the contractor should describe the controls that will be used to satisfy this requirement.]

The contractor shall hold regular meetings with the NHLBI Project Officer and designated OPEC project team at the NHLBI. [For solicitation purposes, the offeror should assume one meeting/week in year 1 of the task order and one meeting/month in each of years 2 and 3.]

TASK 2: STRATEGIC PLANNING AND FORMATIVE RESEARCH

The contractor, in conjunction with the designated OPEC project team, shall develop a creative and innovative 3-year strategic project plan, complete with proposed itemized costs for each activity,

to support the public education goal of the NHLBI to develop a national health education program on the need for Americans to maintain a healthy weight and to avoid overweight and obesity.

The plan shall address strategies for increasing awareness and educating defined groups of patients, health professionals, and the public. The plan shall include national as well as local goals, objectives and strategies for a national awareness outreach effort along with a description of potential regional/local outreach efforts. It shall include communication strategies and address ways to fortify and expand the Hearts N' Parks effort in order to incorporate the idea of "Healthy Weight HometownUS." It shall include strategies for reaching other community groups such as the USDA Extension Service, State and local health departments, hospitals and clinics, private organizations such as sporting goods manufactures, food suppliers such as supermarkets or vending machine operators, and health professionals to build awareness of obesity prevention or treatment issues.

The plan shall provide an overview of the environment for the project. It shall describe the objectives and activities, provide a cost-effective strategy for implementation, name staff and subcontractors, if any, who will participate or contribute, and provide a time line as well as annual performance measures for the project. The plan shall also show expected labor hours and labor costs, and costs for subcontractors and other sources, such as design, photography, or printing, etc. If in the Project Officer's judgment an activity is falling unacceptably behind the planned schedule, the contractor shall identify what actions to be taken to get back on schedule.

The plan shall have a sound theoretical foundation and be based on health-behavior and health-communication models that have been shown to be effective in reaching the chosen target audiences.

Subtask 2a. Plan, Coordinate, and Implement Workshop: The contractor shall work with the designated OPEC project team to plan and conduct a 2-day workshop to consider the predictors of overweight/obesity, weight gain and unhealthy lifestyles; identify and prioritize potential at-risk population groups; consider potential messages for high-risk population groups; recommend appropriate communication channels and community-based activities; and identify potential community partners to help implement the outreach effort. This shall include identifying key participants, preparing letters of invitation, securing meeting room space, and handling all logistics for the workshop. Participants at the workshop shall include communication strategists, community organizations, high-risk patient groups, obesity experts, health care practitioners, and other potential partners. The results of this workshop shall form the initial basis of the strategic plan.

[For solicitation purposes, assume travel and per diem for 20 nongovernment participants. In addition, there will be 15 government participants.]

Subtask 2b. Formative Research: In developing the plan, the contractor shall take into consideration the results of the formative research described in the following subtasks:

Subtask 2b1. Target Audience Analysis: The contractor shall identify one or more primary target audiences (and one or more secondary audiences, if

necessary) and the rationale for selecting each audience. The contractor must give consideration to minority audiences, especially African Americans, Hispanics, and Native Americans.

The contractor shall use state-of-the art formative research techniques to conduct audience analysis, including audience segmentation. This analysis shall include, but not be limited to, existing information on prevalence of the problem; assessments of awareness, knowledge, attitudes, and behavior; psychographic and lifestyle information; demographic information; media habits; orientation towards health; psychological characteristics; and other relevant information about the audience(s).

Subtask 2b2. Existing Program Analysis: The contractor shall conduct an analysis of competing and complementary messages and programs and shall show the position of the NHLBI message within the context of similar messages and programs.

Subtask 2c. Strategic Project Plan: The contractor shall develop a 3-year strategic project plan that includes the following:

- Results of the target audience(s) analysis (Subtask 2b1).
- Results of the analysis of competing and complementary programs and messages (Subtask 2b2).
- Project goals and objectives.
- Research-based recommendations for priority target geographic regions and local communities in the United States for outreach efforts.
- Recommendations for a mix of communication products, marketing strategies, dissemination channels, and outreach activities to achieve the objectives of the project. The project plan shall include strategies for national-level awareness activities and regional/local-level outreach efforts.
- Recommendations will include approaches to releasing products and staging events/activities in phases as appropriate during the 3-year task order period.
- Recommendations for fortifying and expanding the Hearts N' Parks program utilizing the communication products and dissemination channels identified.
- Strategies for identifying and selecting potential organizations with whom NHLBI can form strategic partnerships.
- Strategies for involving NHLBI partners in implementing the project—national outreach effort and regional/local outreach activities.
- Recommendations for implementing Tasks 3, 4, and 5.

TASK 3: CONCEPT DEVELOPMENT, MESSAGE TESTING, IDENTIFYING COMMUNICATION CHANNELS, AND MATERIALS DEVELOPMENT

The contractor, in conjunction with the designated OPEC project team, shall be responsible for the following tasks:

- Subtask 3a. Develop and Test Message Concepts: Develop message concepts that are appropriate for and appealing to the target audience(s). The message concepts shall address the unique needs of each audience segment, i.e., ethnicity/culture, language, reading ability, etc.

The contractor shall test message concepts in the developmental stages to ensure that they are clear, credible, effective, and easily understood and recalled by the intended audience. The contractor shall produce the messages in forms suitable for testing and shall submit a written summary of test results. The research methods used to test the materials shall be selected by the designated OPEC project team in consultation with the contractor, and may include focus groups, professional review, mall intercepts, one-on-one testing, as well as other techniques.

[For solicitation purposes, assume eight focus groups.]

- Subtask 3b. Identify Communication Channels and Recommend Outreach Activities: Identify and recommend a mix of national and community-level communication channels for reaching the target audience(s). The contractor shall also recommend special events and outreach activities for reaching audiences at the national and regional/local levels.

NOTE TO OFFERORS: The contractor is urged to think creatively and realistically. For instance, based on the formative research and the strategic plan, NHLBI may wish to develop a community action kit for mayors of cities or towns to promote “Healthy Weight HometownUS.” This kit could provide communities with program ideas that complement any of the communication products, i.e., radio or TV public service announcements (PSAs), bus signs, etc. The community action kit and the communication products become the tools for the “Healthy Weight HometownUS” cities to use. The 50 Hearts N’ Parks Magnet Centers can be fortified with such a community action kit and ultimately serve as a key communication channel to their communities.

[For solicitation purposes, assume 10 to 15 sites implementing a focused effort with local events in different States at high risk for overweight and obesity. Each of the 50 Hearts N’ Parks Magnet Centers would also implement events to reinforce the campaign and utilize the messages in their programs.]

- Subtask 3c. Materials Development: Design and produce of a variety of communication and outreach materials. The materials will include, but not be limited to, mass media products, print material, and interactive Internet-based products. The actual mix of materials produced for this project will be an outgrowth of the marketing and communication planning process. The contractor shall develop program

materials that are understandable, relevant, attention-getting and memorable, attractive, credible, and acceptable to the target audience(s). The communication products should be developed to allow for local tags and local dissemination. The contractor shall also develop and implement a plan of quality control procedures to be used throughout the cycle of material/product development.

[For solicitation purposes, assume 1 community action kit, 3 TV PSAs, 12 radio PSAs, 4 print PSAs, 1 bus card, 1 Web site, two 12-page brochures, 2 posters, 1 PowerPoint presentation, one 10-minute video, and 1 marketing flyer. Most of these products would be part of an overall package of information that would go to the communities for implementation.]

- Subtask 3d. Test Communications and Outreach Materials: Test communications/outreach materials in the developmental stages to ensure that the messages are clear, credible, effective, and easily understood and recalled by the intended audience. The contractor shall produce the materials in forms suitable for testing and shall submit a written summary of test results. The contractor shall also be responsible for incorporating the findings into the final version of the materials. The research methods used to test the materials will be selected by the designated OPEC project team in consultation with the contractor, and may include focus groups, professional review, mall intercepts, one-on-one testing, as well as other techniques.

[For solicitation purposes, assume testing concepts as well as messages for three TV PSAs.]

TASK 4: PROGRAM IMPLEMENTATION

The contractor, in conjunction with the designated OPEC project team, shall be responsible for the following tasks:

- Subtask 4a. Plan, Coordinate, and Implement Program Launch: Plan and conduct a kickoff event to launch the national outreach effort. This may include planning and preparing materials for a national press conference.
- Subtask 4b. Materials Distribution: Develop and implement a phased marketing plan for outreach materials dissemination, which may include but not be limited to television and radio PSAs, print PSAs, and display ads (e.g., posters, bus cards, dioramas for airport advertising). The contractor shall be responsible for purchasing mailing lists for program materials and products, as necessary. The contractor shall secure program recognition and exposure through channels such as coverage in newspapers, magazines, professional journals, conference exhibits and presentations, and national television news stories. The contractor shall also bring together key community groups and professional organizations to rally around the important cause of overweight and obesity.

The contractor shall also be responsible for designing and maintaining interactive Web pages that support and promote the national outreach program, and for

Internet-based marketing of outreach effort materials and messages.

[For solicitation purposes, assume purchase of mailing lists to reach 50,000 community organizations, hospitals, clinics, park and recreation departments, health care providers/professional association members that may be appropriate to market the message.]

Subtask 4c. Coordinate Involvement of Program Partners and NHLBI National Education Programs and Initiatives: Attract and retain a strong core of strategic program partners who will assist the NHLBI in implementing the national outreach effort and local outreach activities. The program partners may include, but not be limited to, Federal, State, and local Government agencies, voluntary health organizations, health professional organizations, patient organizations, hospitals and other health care facilities, and media. Examples of such groups include NIDDK, NRPA, CDC, President's Council on Physical Fitness and Sports, USDA Extension Service, CORE, NAASO, AHA, Partnership to Promote Healthy Eating and Active Living, Sporting Goods Manufacturers, regional PHS offices that have obesity efforts underway, and healthy weight coalitions of various State health departments.

In developing and disseminating messages and forming partnerships, the contractor shall also work with relevant NHLBI efforts, including: Hearts N' Parks Magnet Center sites, NHLBI's Cardiovascular Disease Enhanced Cardiovascular Dissemination and Utilization Centers, and various minority groups that have community programs underway. In addition, as needed, input will be sought from the National Cholesterol Education Program, National High Blood Pressure Education Program, NHLBI Women's Heart Health Education Initiative, National Asthma Education and Prevention Program, National Center on Sleep Disorders Research.

[For solicitation purposes, assume development and maintenance of relationships with 10 to 15 partners at the national and/or local level.]

Subtask 4d. Provide Support for Local Community Program Outreach Activities: Stimulate regional and local community implementation of "Healthy Weight HometownUS" outreach activities through the 50 Hearts N' Parks Magnet Centers and a more focused effort in 10 to 15 regions of the country. This may include, but not limited to, developing a community tool kit and hometown press kit; assisting in the recruitment of regional and local community partners; providing local/regional/ national contacts or linkages that will assist in the development of local outreach activities; and developing a community spotlight section for the Web pages.

[For solicitation purposes, assume one national outreach activity and 10 regional/local media markets.]

Subtask 4e. Provide Support for Hearts N' Parks Magnet Center Sites: Sustain the 50 Magnet Center sites for the third year of a 3-year commitment, which will include implementation and evaluation of three heart healthy programs for children and

youth as well as three heart healthy programs for adults and seniors from each Magnet Center; maintenance of the existing Hearts N' Parks tracking and database system used to collect the performance measure information; generation of the final report of performance for all Magnet Centers at the end of Year 3; development, execution, and reimbursement for a training session to be conducted for the Magnet Centers in at least five locations around the country; providing technical assistance to the Magnet Centers; and updating the Hearts N' Parks Web site with information related to the projects and performance of the Magnet Center sites.

TASK 5: EVALUATION

The contractor shall design and carry out a series of evaluation activities each year of the task order. These activities shall both capture the results of the national outreach and communications efforts and regional/local community outreach and communications activities and provide direction for future activities.

Subtask 5a. Evaluate National Outreach Effort: The contractor shall develop and conduct a coherent and practical system of evaluating the implementation process and outcomes of the national outreach effort. The system of evaluation shall use a variety of indicators that are appropriate to the programming and communications strategies being evaluated.

For the TV PSAs, the contractor shall be responsible for obtaining, analyzing, and reporting data on how often the TV PSAs are aired and other measures of effectiveness.

The contractor shall also monitor news media (including online media) coverage of the outreach effort, and Web site visitors.

Subtask 5b. Evaluate Scope of Regional/Local Outreach Activities: The contractor shall develop a system of monitoring and reporting on regional and local outreach activities, including but not limited to, types and numbers of activities and programs, geographic locations, and attendance or potential audience reach. Both prior to implementing programs and immediately after their completion, communities should be encouraged to assess the understanding of program participants as to why achieving a healthy weight is important and to evaluate body weights of participants in their local programs in order to determine whether they have been successful at achieving a healthy weight status. Results of the national and regional/local outreach effort evaluation shall be included in the progress reports, as appropriate and in a final evaluation report at the conclusion of the task order.

Building Awareness of A Healthy Weight —Target Audience Analysis

In responding to the SOW, the offerors should exemplify their approach to the project by preparing a brief analysis of a selected audience that may be targeted in the outreach effort and suggest possible approaches to reaching that audience. The analysis should be brief, but should give the Government a clear understanding of how the offeror would organize and carry out the task of identifying and segmenting an audience appropriate for an outreach effort on healthy weight

or overweight and obesity, and heart health. It should state the rationale for choosing an audience, define its characteristics, and the approach to audience segmentation. Further, the offeror should identify creative approaches to reaching the audience at a national and regional/local level and cover each of the various tasks noted in the statement of work (SOW).

This analysis should be written in addition to the offeror's response to carrying out the tasks under the SOW. It must adhere to a 10-page limit including charts, graphs, and other visuals. Offerors should submit the analysis in a separate section of the technical proposal.

REPORTING REQUIREMENTS

A. Technical Progress Reports

1. Monthly Reports: Two reproducible copies shall be due 10 calendar days after the end of each month. Reports shall be in narrative form, and include all activity conducted during the previous month. Monthly reports shall include:

- A quantitative and qualitative description of overall progress including the hours and dollars expended by each task as well as by each activity during that month, and funds remaining in the task order and in each activity;
- An indication of any current problems that may impede performance, and proposed corrective action; and
- A discussion of the work to be performed during the next monthly reporting period.

2. Strategic Project Plan: Two copies of Strategic Project Plan for the outreach effort (as described under Subtask 2c) shall be due 100 days after the project inception. The costs for each proposed activity in the Strategic Project Plan shall be able to be quickly retrieved for program management meetings between the NHLBI Project Officer and the contractor project manager.

3. Annual Update to the Strategic Project Plan: The contractor shall submit two copies of an Annual Update to the Strategic Project Plan for NHLBI Project Officer approval. The plan shall detail the objectives to be met, program strategies to be implemented, and performance measures for the period of performance. The plan shall also provide a time line for accomplishment of tasks.

4. Final Report or Evaluation Report: Two reproducible copies of the report shall be submitted 30 days before the conclusion of the task order.

5. Data Files, Disks, and Media Master Copies: The contractor shall deliver to the NHLBI Project Officer, on or before the last day of the task order period of performance, all master copies of all materials produced during the task order period. This includes all originals (print materials and graphics), disks, videos, CD-ROMs, DVDs, negatives, photographs, slides, computer files and any other media or print master copies. The materials shall be clearly marked and an inventory of all materials shall be included.

6. Technical Reports as Directed by the NHLBI Project Officer: The contractor shall

prepare additional technical reports based on the SOW as specified by the NHLBI Project Officer.

DELIVERABLES

Satisfactory performance of the final task order shall be deemed to occur upon delivery and acceptance by the Contracting Officer, or the duly authorized representative, of the following items, or their equivalent, during each year of the task order, in accordance with the stated delivery schedule:

<u>Item</u>	<u>Description</u>	<u>Quantity</u>	<u>Delivery Schedule</u>
1	Workshop agenda/participant list	1	40 days after task order award
2	Workshop logistics/hold workshop	1	70 days after task order award
3	Strategic Project Plan	2	100 days after task order award
4	Annual Update to Strategic Plan	2	30 days prior to the start of the next task order year
5	Final Report or Evaluation Report	2	30 days before task order ends
6	Monthly Report	2	10 days after end of each month
7	Formative Research and Marketing Reports	2	per Task 2
8	Concept, Message, and Material Testing Reports	2	per Subtasks 3a, 3b, 3d
9	Outreach effort and Outreach Activity Materials	TBD	per Subtasks 3c, 4b, 4c
10	Outreach effort Evaluation Documents and Reports	2	per Task 5

All the above items (1-10) shall be delivered to the NHLBI Project Officer. Copies of the monthly reports and annual update to strategic plan only shall be delivered to the Contracting Officer. Addresses are as follows:

Project Officer
NHLBI/OPEC
31 Center Drive MSC 2480
Bldg. 31 Room 4A10
Bethesda, MD 20892-2480

Contracting Officer
NHLBI/BDP Contracts Section
6701 Rockledge Drive MSC 7902
Bethesda, MD 20892-7902

Reference Material

The NHLBI strongly recommends that offerors become familiar with the following reference materials. They are intended to assist offerors in the preparation of their proposals. Failure of offerors to examine the reference materials prior to proposal preparation and submittal will be at the offeror's risk.

National Heart, Lung, and Blood Institute *Clinical Guidelines on the Identification, Evaluation, and Treatment of Overweight and Obesity in Adults: Evidence Report*,
www.nhlbi.nih.gov/guidelines/obesity/ob_gdlns.htm

NHLBI's Aim for a Health Weight Web page,
www.nhlbi.nih.gov/health/public/heart/obesity/lose_wt/index.htm

National Heart, Lung, and Blood Institute. NHLBI Funds Enhanced Dissemination and Utilization Centers to Improve Cardiovascular Health, *HeartMemo*, Spring 2001,
www.nhlbi.nih.gov/health/prof/heart/other/hm_sp01/index.htm

Hearts N' Parks, www.nhlbi.nih.gov/health/prof/heart/obesity/hrt_n_pk/index.htm

The National Campaign to Raise Awareness of Heart Disease in Women,
<http://www.nhlbi.nih.gov/health/hearttruth/index.htm>

Salud para su Corazón, http://www.nhlbi.nih.gov/health/prof/heart/latino/latin_pg.htm

Surgeon General's Call to Action to Prevent and Decrease Overweight and Obesity,
<http://www.healthfinder.gov/docs/doc06401.htm>

IV. **Technical Evaluation Criteria**

Proposals submitted in response to this solicitation will be subjected to an in-house review by an ad hoc committee of the NHLBI and other NIH staff who are familiar with the requirements of the RFP.

Specific technical evaluation criteria to be considered in the review of proposals are shown below:

Understanding of the Requirements and Adequacy of the Proposed Approach	35 points
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Evaluation will be based on the offeror's response to Task Areas 1-5 and on the Target Audience Analysis prepared. The evaluation will focus on the understanding of the kind and level of support required, the quality of the technical approach, and the quality, efficiency, and effectiveness of the work products described and demonstrated by the proposal. The offeror shall demonstrate expertise and success in developing culturally sensitive materials; creative and attractive graphic design; print material design and layout; public service announcement (PSA) production and video production; Web site design; photographs; PowerPoint presentations; and other products, i.e., community communication kits, etc. The offeror shall demonstrate the ability to package and deliver mass media products as part of an overarching community outreach effort, including but not limited to, television and radio PSAs, print PSAs, and display ads (e.g., posters, bus cards, dioramas for airport advertising). The offeror shall demonstrate expertise and success in securing program recognition and exposure through channels such as coverage in newspapers, magazines, professional journals, conference exhibits and presentations, and national television news stories. The offeror shall also demonstrate expertise at bringing together key community groups and professional organizations to rally around an important cause. The offeror must provide a detailed plan for an effective system of quality control, citing examples of its experience with the types of errors that may be encountered in work of the kind to be performed under this task order and the mechanisms that it has in place to guard against future occurrence of such errors.

Qualifications of Personnel

30 points

The personnel to be used under this task order will be evaluated on the basis of experience, qualifications, and availability. The personnel shall be appropriate for the level and kind of work required. Qualifications and experience will be evaluated as follows:

The program manager shall be a senior staff member of the organization. He/she shall be evaluated on prior performance and demonstrated ability in effective program management and cost and quality control. Supporting materials shall include a curriculum vitae and statements of reference concerning management activities similar to those solicited. If the proposal includes subcontracting relationships, evidence must be provided of the ability of the program manager to ensure timely completion of quality work from a subcontractor.

The qualifications, availability, and experience of proposed professional staff to work under this task order (and, if proposed, those committed in writing but not yet working with the organization) will be evaluated on the basis of curricula vitae, statements of reference (letters and memos complimenting the individual for high-quality work), and samples of work. Work samples will be judged in terms of ability to develop materials that are appropriate, clear, and succinct. Correct use of grammar, quality of editing, and absence of jargon are imperative. The proposal itself will be considered a work sample, and contributors to the proposal shall be identified by name and corresponding section of the proposal.

Organization and Administration

20 points

The clarity and effectiveness of organizational relationships, including relationships with subcontractor(s), if any, expected ease and efficiency of management and control, and organization's commitment to this task order will be evaluated. Particular emphasis will be placed upon the management structure proposed for any subcontracting relationships. If the proposal includes subcontracting relationships, it is imperative that the contributions of each organization be clearly identified and the methods relied upon to ensure effective integration of activities be specified in detail. A subcontractor may augment, but may not supply the full expertise for, any of the five task areas of the task order.

Related Experience of the Organization

15 points

The experience of the organization as described in the proposal and in statements of reference (letters or memos from satisfied customers) will be evaluated. Organization's experience must show substantial expertise in projects similar to those described in the RFTOP. The suitability of facilities and resources for performance of the proposed task order will be evaluated.

Total Weight

100 points

IV. **Special Requirements**

1. Offerors should limit the size of their technical proposals to 35 pages, 25 pages for the Technical Approach (including any charts, graphs, or other visuals), and 10 pages for the Target Audience Analysis (also including any charts, graphs, or other visuals). There should be 1-inch margins all around, and the font should be Arial 11 pt. or Times New Roman 12 pt.
2. Staff bios, CVs, statements of reference supporting program manager's previous management activities, work samples, and letters from satisfied customers are not included in the 35-page limit. A brief narrative description of proposed staff members' experience, capabilities, and expertise. The proposed staff would include the corporate monitor, project manager, health educator/public health specialist, nutritionist, health education writer, creative director for campaign materials, Webmaster, etc.
3. Sample Materials—each sample should be labeled with the offeror's name and placed in a box that is also labeled. A key or guide should be included that describes the proposed project staff members' involvement in developing or writing the sample materials. Samples should be submitted that demonstrate the offeror's ability to design and create materials and products for a national public health outreach initiative, at least two from the following categories:
 - Television PSAs, ads, or other video products;
 - Radio PSAs, ads, or other audio products;
 - Print advertisements or other print products that feature public health messages;
 - Community action toolkit
 - Print materials developed for patients, the public or health professionals;
 - The URL of a Web site or page developed by the offeror.

If available, the offeror may submit up to two samples of promotional materials (other than those listed above) developed for a community-based educational program and/or an interactive product, such as a CD-ROM or DVD.

4. An original and 12 copies of the technical proposal and an original and 2 copies of

the business proposal should be submitted. Costs should be broken down as follows: 8/15/03 - 8/14/04; 8/15/04 - 8/14/05; 8/15/05 - 8/14/06. The total estimated effort is 31,620 hours.

5. To assure rapid response to changing program needs, and to assure adequate day-to-day management of complex activities that must be conducted in close concert with activities of NHLBI staff, other Federal agencies, and other contractors, the project staff of the successful offeror must be available to meet with program staff at the NIH in Bethesda with as little as 2 hours advance notice. The offeror must submit a plan to meet this requirement. Thus, offerors are required to submit evidence of the ability to obtain the necessary facilities, equipment, and personnel. The description shall identify those personnel who would be available. Also, the arrangement, whether firm or contingent upon award, for the rental, purchase, or other acquisition of resources necessary for the day-to-day operation shall be described and supportive evidence furnished for resources not yet functional.
6. To assure rapid response to changing program needs, and to assure adequate day-to-day management of complex activities that must be conducted in close concert with activities of NHLBI staff, other Federal agencies, and other contractors, it is imperative that the offeror demonstrate convincingly for any proposed subcontracting relationships its ability to ensure responsiveness to the needs of the Institute and to maintain management accountability. The extent to which any proposed subcontracting relationship is integrated into the offeror's proposal will be considered relevant evidence on this issue.
7. The NHLBI's communications are distributed widely with target audiences including the Congress of the United States, the Department of Health and Human Services, other Executive Branch Departments, the medical care and scientific research communities, and the public. Therefore, it is imperative that all materials and services delivered to the Institute be provided in a timely and accurate manner and that all materials leaving the Institute be error free and received by the proper audiences.

TO # NICS-137

TITLE: Planning, Developing, Implementing, and Evaluating NHLBI's Healthy Weight Initiative

PART II - CONTRACTOR'S REPLY: CONTRACT #263-01-D-0_____

Contractor:

Points of Contact:

Phone: Fax:

Address:

TOTAL ESTIMATED COST:

Pricing Method:

TOTAL ESTIMATED NUMBER OF HOURS:

PROPOSED COMPLETION DATE:

FOR THE CONTRACTOR:

Signature

Date

SOURCE SELECTION:

WE HAVE REVIEWED ALL SUBMITTED PROPOSALS HAVE DETERMINED THIS FIRM SUBMITTED THE BEST OVERALL PROPOSAL AND THE PRICE/COST IS REASONABLE.

Billing Reference # _____

Appropriations Data: _____

RECOMMENDED: _____

FAX #

Signature - Project Officer

Date

APPROVED: _____

FAX #

Signature - Contracting Officer

Date

NIH APPROVAL -

CONTRACTOR SHALL NOT EXCEED THE ESTIMATED LABOR HOURS OR ESTIMATED TASK ORDER AMOUNT WITHOUT THE WRITTEN APPROVAL OF THE CONTRACTING OFFICER & ICS COORDINATOR

APPROVED: _____

FAX 301-435-6101 Signature –Anthony M. Revenis, J.D., NIH-ICS Coordinator

Date